

ISSUE SLIP STAFF AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	AW		6/14/91
O.I.P.E. CLASSIFIER		8	6/16/91
FORMALITY REVIEW	WN	67479	6-24-91

10-12-99

INDEX OF CLAIMS

✓	Rejected	N	Non-elected
=	Allowed	I	Interference
-	(Through numeral) Canceled	A	Appeal
+	Restricted	O	Objected

Claim	Date
Final	
Original	
1	3-9-92
2	6-19-93
3	6-28-93
4	5-20-94
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Claim	Date
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Rest Available Co

If more than 150 claims or 10 actions
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